## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

	,			
Applica	ition	Or	Docket	Number

9/142 290 Application or Docket Number

CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS		30				ſ	RATE	FEE	1	RATE	FEE	
FOR		NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			30 minus 20=		. 10			X\$ 9=		OR	X\$18=	180
INDEPENDENT CLAIMS. 2 min				nus 3 =	•			X40=		OR	X80=	
MULTIPLE DEPENDENT CLAIM PRESENT								+135=		OR	+270=	
* If the difference in column 1 is less than zero, enter "0" in column					olumn 2	L	TOTAL		OR	TOTAL	890	
9-15-05 (Column 1) (Column 2) (Column 3)						4	SMALL ENTITY (			OTHER THAN		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IEST BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 30	Minus	** ==	30	= <del>O</del>		X\$ 9=		OR	X\$18=	
	Independent	· 2	Minus	FNIDENI	2	= 🚓		X40=		OR	X80=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +135= OR +270=												
TOTAL OR TOTAL ADDIT. FEE												
(Column 1) (Column 2) (Column 3)												
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		PREVI	BER :	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=	
ME	Independent	+	Minus	***		=	]	X40=		OR	X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					┚┞	.105			. 270		
							L	+135= , TOTAL		OR	+270= TOTAL	
							A	DDIT. FEE		OR	ADDIT. FEE	
		(Column 1) CLAIMS	·	(Colui		(Column 3)	· _				•	
AMENDMENT C		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE.	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**	٠	=	JΓ	X\$ 9=		OR	X\$18=	
	Independent	•	Minus .	*** .		=	]	X40=			X80=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										OR		
If the entry in column 1 is less than the entry in column 2; write "0" in column 3.												
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
		ber Previously Pai					er four	nd in the app	propriate box	in col	lumn 1.	